Michael O. Leavitt Governor Ted Stewart Executive Director Robert L. Morgan State Engineer

1594 West North Temple, Suite 220 Box 146300 Salt Lake City, Utah 84114-6300 801-538-7240 801-538-7467 (Fax)

## BEFORE THE STATE ENGINEER OF THE STATE OF UTAH

| RE: | Illegal use of water in excess of right | ) | ORDER OF THE   |
|-----|---|---|----------------|
|     | McKeon Beef Inc.                        | ) | STATE ENGINEER |
|     | Water Right No(s). 71-101               | ) |                |

According to Utah Code Ann. section 73-3-1, no appropriation of water may be made and no rights to the use of water may be initiated without an application approved by the State Engineer. Water Right No(s). 71-101 allows the annual use of 48.36 acres of irrigation. A comparison of aerial photography taken in mid-June 1998 with the updated water rights map shows that you are irrigating 24.94 acres more than allowed by above mentioned water right no(s). The attached map shows the location of the illegally irrigated land.

NOW THEREFORE, according to Utah Code Ann. sections 73-2-1 and 73-5-3, you are hereby ORDERED to cease the use of all water in excess of the uses and limits set forth in Water Right No(s). 71-101.

If you use water in violation of this ORDER, you will be in jeopardy of legal proceedings against you. Legal proceedings will be commenced as Division resources allow.

I strongly urge you to give this matter your immediate attention. Should you have questions regarding this ORDER, please contact Kerry Carpenter, Regional Engineer, at 586-4231 or Lee Sim. Assistant State Engineer, at 538-7380.

Dated this 9th day of October, 1998

Robert L. Morgan, P.E.

State Engineer

cc:

Kerry Carpenter

LaVar Davis

Enclosure

| \$2 15<br>Si                  | Z 155 78 a US Postal Service Receipt for Cer No Insurance Coverage Do Maria Torragation Service A North T Street & North T P.O. Box 1 Post City, Uta | ine Keon<br>tified Mail<br>Provided.<br>Provided.<br>Simple: Ste. 220<br>46300 |
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|                               | Postage  | \$   |
|                               | Certified Fee  |  |
|                               | Special Delivery Fee CIT   |  |
| 10                            | Restricted Delivery Fee  | E  |
| 199                           | Return Receipt Showing to Whom & Date Delivered  | 1998   |
| Apri                          | Return Receipt Showing to Whom,<br>Date, & Addressee's Address   | 9  |
| 800                           | TOTAL Postage & Fees   | \$100  |
| Form <b>3800</b> , April 1995 | Postmark or Date   |  |
| PS Fc                         |  |  |

| PS Form <b>3811</b> , Apr. 1989 *U.S.G.P.O. 1989-238-815 | 7. Daily of Delivery | 8. Signature - Agent MCLEAN | 5. Signature — Addressee X                              |   | 1083 W 3300<br>MILFORD UT 84751 | APRIL MCKEON                         | 3. Article Addressed to: MCKEON BEEF INC | and check box(es) for additional service(s) requested.  1. Show to whom delivered, date, and addressee's address.  (Extra charge) | Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees the date of delivery. | 3 and 4                                     |
|--|----------------------|-----------------------------|---|---|---------------------------------|--------------------------------------|--|---|--|---|
| 5 DOMESTIC RETURN RECEIPT                                |                      |                             | 8. Addressee's Address (ONLY if requested and fee paid) | Always obtain signature of addressee or agent and DATE DELIVERED. |                                 | Type of Service:  Registered Insured | 4. Article Number 2 155 784 507          | dress. 2.   Restricted Delivery  (Extra charge)   | side. Failure to do this will prevent this card you the name of the person delivered to and are available. Consult postmaster for fees   | סמו אוכסס מוס מסמוסמ, מוזמ סטווקומנס ונסווס |

